Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS			(Colu		(001	umi z)				OR		ENTITY
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		RATE BASIC F			RATE BASIC FEI	FEE 740.00
TOTAL CHARGEABLE CLAIMS				minus 20=		*			+	HOR		740.00
INDEPENDENT CLAIMS			 	minus 3 =		*		X\$ 9=		OR	X\$18=	
MULTIPLE DEPENDENT CLAIM P			<u></u>	<u> </u>				X42=		OR	X84=	
_	lf the idifference		- 1			<u> </u>		+140=		OR	+280=	
* If the difference in column 1 is I						column 2		TOTAL		OR	TOTAL	
	C '	CLAIMS AS (Column 1)	AMENDE	D - PAR' Colun)		(Column 3)	SMALL ENTI			OR	OTHER SMALL	
	CLAIMS -			HIGHE		(Oojairiii 3)	7 6		ADDI-		SINALL.	
AMENDMENT		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAI FEE	1 1	RATE	ADDI- TIONAL FEE
NOW	Total	. 20	Minus	** 2	0	=		X\$ 9=		OR	X\$18=	4
AMI	Independent	* Z	Minus	***	_	=		X42=		OR	X84=	
	1.110111120	ENTATION OF W	OLTIPLE DE	PENDENT	CLAIM			+140=		OR	+280 =	
	•						Δ.	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE	•
		(Column 1)		(Colum	n 2)	(Column 3)		DD11.1 LL			NDUII. FEE I	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Q	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JETIPLE DEI	PENDENT (CLAIM			+140=		1. t		·
										OR	+280=	· · · · · ·
							AD	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE	
-		(Column 1) CLAIMS		(Column		(Column 3)						
LENI C	en en skap blikke se	REMAINING AFTER AMENDMENT	Emily Line St. Li	HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMEN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	1,55
	Independent	*	Minus	***		=		X42=		·	X84=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEF	ENDENT C	LAIM		-			OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "30." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												